



STATE OF CONNECTICUT
DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES
A Healthcare Service Agency

Dannel P. Malloy
Governor

Miriam Delphin- Rittmon Ph.D.
Commissioner

Memorandum:

TO: Public Health Committee

FROM: Commissioner Miriam Delphin-Rittmon, Ph.D., DMHAS

DATE: February 24, 2016

SUBJECT: Written Testimony on Senate Bill 130

Good Morning Senator Gerratana, Representative Ritter and distinguished members of the Public Health Committee. I am Miriam Delphin-Rittmon, Commissioner of the Department of Mental Health and Addiction Services (DMHAS) and I am writing today to address Senate Bill 130 AN ACT CONCERNING PATIENT INFORMATION AND THE APCD.

DMHAS has serious concerns related to Senate Bill 130, "AAC Patient Information and the APCD." This bill will allow individuals to opt-out or exclude some of their data from being reported to the All Payers Claims Database (APCD). The usefulness of the APCD is predicated upon collecting full claims data for all insured individuals, and allowing individuals to opt out would greatly diminish the APCD's effectiveness.

The Department of Mental Health and Addiction of Services (DMHAS) is a healthcare services agency that provides behavioral health treatment and recovery support services to nearly 110,000 individuals annually. As a healthcare provider DMHAS understands the value of healthcare data for planning, improving clinical practice and policy development, which in turn, ensures the highest quality care possible. We also recognize the importance health care data has to the individual providing it. We value the confidentiality of the individuals we serve and take every measure necessary to ensure the privacy of their data. Additionally, as a recovery services agency, DMHAS has a long tradition of honoring individual choice and carefully weighs this when requesting information.

In the instance related to this legislation, DMHAS feels that, while consumer choice is important, the information collected by the APCD would pose no risk to individuals as reports are generated through de-identified data. Therefore individuals should not have an opt out or exclusion option.

As a member of the Board of Directors of Access CT Health, I know that the Board deliberated carefully about the collection of data and whether or not to include an opt-out provision. This had been a major topic of discussion throughout the planning and development of the APCD. After careful deliberation the Board voted unanimously to exclude an opt-out provision, because in order to collect, assess and report healthcare information concerning quality and cost-effectiveness, the data needed to represent all insured individuals.

In light these considerations please consider opposing this bill. I appreciate the opportunity to address this important issue today.